PTO/SB/22 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006		Docket Number (Optional) 219002034300			
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		2,00020	, , , , , , , , , , , , , , , , , , , ,		
Application Number 10/719,082		Filed Nover	nber 20, 2003		
For USE OF TGF-BETA INHIBITORS TO COUNTERACT PATHOLOGIC CHANGES IN THE LEVEL OR FUNCTION OF STEROID/THYROID RECEPTORS					
Art Unit 1616		Examiner	N. Handy		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$		
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		
X Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00		
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attacked to play the property of the payment by credit card.		annlication to a Donasit	Aggaint		
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.					
I am the applicant/inventor.	ntarast Saa 37	CER 3 71			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
attorney or agent of record. Reg	istration Numbe	r44,957	_		
attorney or agent under 37 CFR Registration number if acting under			_ ·		
Signature		April 30, 2007 Date			
James J. Mullen, III		(858) 72			
Typed or printed name		Telephone Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
X Total of forms are submitted.					

05/04/2007 SSITHIB1 00000028 031952 10719082

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1020.00 DA

PTO/SB/17 (02-07)

Approved for use through 02/28/2007. OMB 0651-0032

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Effective on 12/08/2004.		npiete if Knowi	<u></u>		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/719,082	2003		
FEE TRANSMITTAL	Filing Date	November 20, 2			
For FY 2007	First Named Inventor Examiner Name	N. Handy	IINO		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1616			
TOTAL AMOUNT OF PAYMENT (\$) 1,020.00		219002034300			
TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300					
METHOD OF PAYMENT (check all that apply)					
Check Credit Card Money Order None Other (please identify):					
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP					
For the above-identified deposit account, the Director is	hereby authorized to: (che	eck all that apply)			
x Charge fee(s) indicated below	Charge fee(s) ir	ndicated below, ex	cept for the filing fee		
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17					
FEE CALCULATION					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES					
		NATION FEES			
Application Type Fee (\$) Fee (\$) Fee (\$	Small Entity) Fee (\$) Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)		
Utility 300 150 500	250 200	100			
Design 200 100 100	50 130	65			
Plant 200 100 300	150 160	80			
Reissue 300 150 500	250 600	300			
Provisional 200 100 0	0 0	0			
2. EXCESS CLAIM FEES			Small Entity		
Fee (\$) Fee (\$)					
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)			50 25		
Multiple dependent claims			200 100 360 180		
	Paid (\$)	Aultiple Depende			
			ee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.	<u></u>	22.141	0.00		
Indep. Claims					
- = x = 0.00					
HP = highest number of independent claims paid for, if greater than 3.					
3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50					
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
Total Sheets Extra Sheets Number of each a	dditional 50 or fraction there	oof Fee (\$)	Fee Paid (\$)		
100 = /50 (round up to a whole number) x =					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)					
Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00					
SUBMITTED BY					
Signature 2	Registration No. (Attorney/Agent) 44,957	Telephone	(858) 720-7940		
Name (Print/Ape) James J. Mullen, III		Date	April 30, 2007		